WELL-BEING OF THE EMERGENCY MEDICAL TECHNICIAN-BASIC

LESSON OBJECTIVE

- Identify the psychological needs and reactions of an EMT-B and describe the preventative measures taken to protect the EMT-B both physically and mentally.

OVERVIEW

- **Emotional Aspects of Emergency Care**
- **Scene Safety**
- **Advanced Safety Precautions**

Emotional Aspects of Emergency Care

- Death and Dying
- Stressful Situations
- Stress Management
- Critical Incident Stress Debriefing (CISD)
- Comprehensive CISD

Death and Dying

- **Stages**
  - **Denial (“Not me.”) - defense mechanism; buffer between shock of death and dealing with illness/injury**
  - **Anger (“Why me.”)**
    - **EMT-Bs may be target of anger**
    - **Don’t take anger/insults personally**
    - **Use good listening/communication skills**
    - **Be empathetic**

Stages of Death & Dying (cont)

- **Bargaining (“OK, but first let me…”) - agreement that will “postpone” death for a short time**
- **Depression (“OK, but I haven’t…”)**
  - **Sadness and despair**
  - **Usually silent and retreats into own world**
- **Acceptance (“OK, I am not afraid.”)**
  - **Does not mean patient is happy about dying.**
  - **Family requires more support in this stage**

Dealing with Dying Patient and Family Members

- Patient needs dignity, respect, sharing, communication, privacy and control
- Family may express rage, anger and despair
- Listen empathetically
- DO NOT falsely reassure
- Use gentle tone of voice
- “Everything that can be done, will be done.”
- Reassuring touch, if appropriate
- Comfort family

Stressful Situations

- **Examples:**
  - **Mass casualty situations**
  - **Infant and child trauma**
  - **Amputations**
  - **Infant/child/elder/spouse abuse**
  - **Death/injury to co-worker or other public safety personnel**
- **EMT-B will encounter personal stress AND patients/bystanders in severe stress**

Stress Management

- **Recognize Warning Signs**
  - **Irritability to co-workers, family, friends**
  - **Inability to concentrate**
  - **Difficulty sleeping/nightmares**
  - **Anxiety**
  - **Indecisiveness**
  - **Guilt**
  - **Loss of appetite**

Stress Management

Recognize Warning Signs:

- **Irritability**
- **Inability to concentrate**
- **Difficulty sleeping / nightmares**
- **Anxiety**
- **Indecisiveness**
- **Guilt**
- **Loss of appetite**
- **Loss of interest in sexual activities**
- **Isolation**
- **Loss of interest in work**

Stress Management (cont)

- **Life-style Changes**
  - **Helpful for “job burnout”**
  - **Change diet**
    - **Reduce sugar, caffeine & alcohol intake**
    - **Avoid fatty foods**
    - **Increase carbohydrates**
  - **Exercise**
  - **Practice relaxation techniques, meditation, visual imagery**

Stress Management (cont)

- **Balance work, recreation, family, health, etc.**
- **EMS Personnel and family's/friend's responses**
  - **Lack of understanding**
  - **Fear of separation or being ignored**
  - **On-call situations cause stress**
  - **Can't plan activities**
  - **Frustration caused by wanting to share**

Stress Management (cont)

- **Work Environment Changes**
  - **Request work shifts allowing more time to relax with family and friends**
  - **Request rotation of duty assignment to less busy area**
- **Seek/refer professional help**

Critical Incident Stress Debriefing (CISD)

- Team of peer counselors and mental health professionals who help EMS workers deal with critical incident stress
- Meet 24 to 72 hours of major incident
  - Open discussion of feelings, fears, reactions
  - Not investigation or interrogation
  - All information confidential
  - Team evaluates information and offer suggestions on overcoming stress

CISD (cont)

- **Designed to accelerate normal recovery process after experiencing critical incident**
  - **Works well; feelings are vented quickly**
  - **Environment is non-threatening**
- **How to access local CISD system**

Comprehensive CISD

- Pre-incident stress education
- On-scene peer support
- One-on-one support
- Disaster support services
- Defusings
- CISD
- Follow up services
- Spouse/family support
- Community outreach programs
- Other health and welfare programs
  - i.e.: wellness programs

Scene Safety

- **Body Substance Isolation (BSI) - EMT-B's and patients' safety**
  - **Hand washing**
  - **Eye protection**
    - **Eye shields over prescription glasses**
    - **Goggles are NOT requires**
  - **Gloves (vinyl or latex)**
    - **Needed for contact with blood or bloody body fluids**
    - **Change between contact with different patients**

BSI-EMT & Patient Safety(cont)

- **Gloves (Utility) - needed for cleaning vehicles and equipment**
- **Gowns**
  - **Large splash situations; eg field delivery and major trauma**
  - **Change of uniform preferred**

BSI-EMT & Patient Safety(cont)

- **Masks**
  - **Surgical type for possible blood splatter (worn by care provider)**
  - **High Efficiency Particulate Air (HEPA) respirator worn by care provider if patient suspected of being diagnosed with tuberculosis**
  - **Airborne disease -surgical type mask (worn by patient)**

BSI-EMT & Patient Safety(cont)

- **Requirements and availability of specialty training**
- **OSHA/state regulations regarding BSI**
- **Statutes/regulations reviewing notification and testing in an exposure incident**

PERSONAL PROTECTION

Hazardous Materials

- **Identify possible hazards**
  - **Binoculars**
  - **Placards**
  - ***Hazardous Materials, The Emergency Response Handbook, published by the US DOT***
- **Protective Clothing**
  - **Hazardous material suits**
  - **Self-Contained Breathing Apparatus**

PERSONAL PROTECTION

Hazardous Materials

- Scenes controlled by specialized Haz-Mat teams
- EMT-B's provide care ONLY after scene is safe and patient contamination limited
- Requirements and availability of specialized training

PERSONAL PROTECTION

Rescue

- Identify and reduce potential life threats
  - Electricity
  - Fire
  - Explosion
  - Hazardous materials
- Protective Clothing
  - Turnout gear, puncture-proof gloves, helmet, eyewear
- Rescue teams for extensive/heavy rescue

PERSONAL PROTECTION
Violence

- **Scene controlled by law enforcement before care provided**
  - **Perpetrator of crime**
  - **Bystanders**
  - **Family members**
- **Behavior at Scene**
  - **Do not disturb scene unless required for medical care**
  - **Maintain chain of evidence**

Advance Safety Precautions

- **Suggested Immunizations**
  - **Tetanus prophylaxis**
  - **Hepatitis B vaccine**
  - **Verification of immune status with respect to commonly transmitted contagious diseases**
  - **Access of availability of immunizations in the community**
  - **Tuberculin purified protein derivative (PPD) testing**
  - **Others**

SUMMARY

- **Emotional Aspects of Emergency Care**
- **Scene Safety**
- **Advanced Safety Precautions - Immunizations**

QUESTIONS?